

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 12  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 10 / 28 / 2016	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW		Amount 10226.29	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4759
Purpose of Expenditure Canvassing Salary & Benefits	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 202931.38		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1636.27	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4760
Purpose of Expenditure Canvassing Salary & Benefits	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate HASSAN, MARGARET WOOD, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 5200.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11862.56
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

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Date

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10 / 31 / 2016

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 2 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 28 / 2016</div> </div>	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW		Amount 2015.37	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4761
Purpose of Expenditure Canvassing Salary & Benefits	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MI
Calendar Year-To-Date Per Election for Office Sought 9318.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1008.17	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4762
Purpose of Expenditure Canvassing Salary & Benefits	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV
Calendar Year-To-Date Per Election for Office Sought 18881.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3023.54
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 28 / 2016</div> </div>	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1125 17TH ST NW		Amount 2492.85	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4772
Purpose of Expenditure Canvassing Salary & Benefits	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1246.43	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4773
Purpose of Expenditure Canvassing Salary & Benefits	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016	
Name of Federal Candidate HASSAN, MARGARET WOOD, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	3739.28
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 4 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 28 / 2016</div> </div>	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1246.43	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4786
Purpose of Expenditure Canvassing Salary & Benefits	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2016	
Name of Federal Candidate HASSAN, MARGARET WOOD, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 1125 17TH ST NW		Amount 2492.85	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4787
Purpose of Expenditure Canvassing Salary & Benefits	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	3739.28
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 28 / 2016</div> </div>	

Full Name of Payee <b>LANDMARK STRATEGIES</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 8741 CENTER RD		Amount 877.69	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SE.4763
Purpose of Expenditure Live Calls	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>LOOKOUT MEDIA</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address PO BOX 33341		Amount 13331.19	
City WASHINGTON	State DC	Zip Code 20033	Transaction ID : SE.4778
Purpose of Expenditure VIDEO SHOOT - SUPREME COURT	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	14208.88
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

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Date

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10 / 31 / 2016

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 10 / 28 / 2016

Full Name of Payee <b>LOOKOUT MEDIA</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016
Mailing Address PO BOX 33341		Amount 6680.08
City WASHINGTON	State DC	
Purpose of Expenditure VIDEO SHOOT - DECISION TIME	Category/ Type 004	Transaction ID : SE.4779 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016
Name of Federal Candidate CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought 335006.23		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>LOOKOUT MEDIA</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016
Mailing Address PO BOX 33341		Amount 6680.08
City WASHINGTON	State DC	
Purpose of Expenditure VIDEO SHOOT - DECISION TIME	Category/ Type 004	Transaction ID : SE.4780 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016
Name of Federal Candidate TRUMP, DONALD J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought 341686.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	13360.16
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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HICKEY, BRIAN, E, Mr.,

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10 / 31 / 2016

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)  
**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

FEC IDENTIFICATION NUMBER ▼

**C** C00624817Check if ☒ 24-hour report ☐ 48-hour report☐ New report ☒ Amends report filed onM M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Full Name of Payee

**MOSAIC**

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016

Mailing Address 4801 VIEWPOINT PLACE

Amount

City

CHEVERLY

State

MD

Zip Code

20781

61374.00

Transaction ID : SE.4774

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016Purpose of Expenditure  
DIGITAL ADSCategory/  
Type

004

Name of Federal Candidate

CLINTON, HILLARY, RODHAM, ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☒ President☐ Senate

State: \_\_\_\_\_

Calendar Year-To-Date  
Per Election for Office Sought

314254.27

Disbursement For: ☐ Primary ☒ General  
2016☐ Other (specify) ► \_\_\_\_\_

Full Name of Payee

**THOMPSON RYER**

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Mailing Address 2120 L Street, NW, #305.

Amount

City

Washington

State

DC

Zip Code

20037

740.69

Transaction ID : SE.4764

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016Purpose of Expenditure  
Door HangersCategory/  
Type

004

Name of Federal Candidate

CLINTON, HILLARY, RODHAM, ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☒ President☐ Senate

State: \_\_\_\_\_

Calendar Year-To-Date  
Per Election for Office Sought

204549.76

Disbursement For: ☐ Primary ☒ General  
2016☐ Other (specify) ► \_\_\_\_\_(a) **SUBTOTAL** of Itemized Independent Expenditures..... ►

62114.69

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ►(c) **TOTAL** Independent Expenditures..... ►

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HICKEY, BRIAN, E, Mr.,

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Date

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10 / 31 / 2016

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)  
**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

FEC IDENTIFICATION NUMBER ▼

**C** C00624817Check if ☒ 24-hour report ☐ 48-hour report☐ New report ☒ Amends report filed onM M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2016Full Name of Payee  
**THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City State Zip Code  
Washington DC 20037Purpose of Expenditure  
Door HangersCategory/  
Type 004

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Amount

127.40

Transaction ID : SE.4765

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Name of Federal Candidate

MASTO, CATHERINE CORTEZ, , ,

☒ Support  
☐ OpposeOffice Sought: ☐ House District: \_\_\_\_\_  
☐ President ☒ Senate State: NVCalendar Year-To-Date  
Per Election for Office Sought

19009.28

Disbursement For: ☐ Primary ☒ General  
2016 ☐ Other (specify) ▶ \_\_\_\_\_Full Name of Payee  
**THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City State Zip Code  
Washington DC 20037Purpose of Expenditure  
Door HangersCategory/  
Type 004

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Amount

106.45

Transaction ID : SE.4766

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2016

Name of Federal Candidate

HASSAN, MARGARET WOOD, , ,

☒ Support  
☐ OpposeOffice Sought: ☐ House District: \_\_\_\_\_  
☐ President ☒ Senate State: NHCalendar Year-To-Date  
Per Election for Office Sought

5306.99

Disbursement For: ☐ Primary ☒ General  
2016 ☐ Other (specify) ▶ \_\_\_\_\_(a) **SUBTOTAL** of Itemized Independent Expenditures..... ▶

233.85

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶(c) **TOTAL** Independent Expenditures..... ▶

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 28 / 2016</div> </div>	

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 106.45	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4767
Purpose of Expenditure Door Hangers	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MI	
Calendar Year-To-Date Per Election for Office Sought 9424.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 48330.51	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4768
Purpose of Expenditure POSTAGE	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought 252880.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	48436.96
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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HICKEY, BRIAN, E, Mr.,

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NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 10 / 28 / 2016

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016
Mailing Address 2120 L Street, NW, #305.		Amount 710.67
City Washington	State DC	Zip Code 20037
Purpose of Expenditure POSTAGE	Category/Type 004	Transaction ID : SE.4769 Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016
Name of Federal Candidate DRISKELL, GRETCHEN, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 10135.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016
Mailing Address 2120 L Street, NW, #305.		Amount 732.29
City Washington	State DC	Zip Code 20037
Purpose of Expenditure POSTAGE	Category/Type 004	Transaction ID : SE.4770 Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016
Name of Federal Candidate HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: <input checked="" type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 6039.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1442.96
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 31 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 11 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 28 / 2016</div> </div>	

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 1033.28	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4771
Purpose of Expenditure POSTAGE	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016	
Name of Federal Candidate SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 740.69	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4775
Purpose of Expenditure Door Hangers	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016	
Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1773.97
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 31 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 12 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 10 / 28 / 2016

Full Name of Payee <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2016
Mailing Address 2120 L Street, NW, #305.		Amount 106.45
City Washington	State DC	
Purpose of Expenditure Door Hangers	Category/ Type 004	Transaction ID : SE.4777 Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016
Name of Federal Candidate HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
		6145.73

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	106.45
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	164042.58

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 31 / 2016

Signature